

Schedule by Phone
866.717.2551


Schedule Online
SolisMammo.com


Fax Number
866.366.5798

PATIENT INFORMATION

Patient Name _____ DOB _____ Patient Phone Number _____
Physician _____ Date _____

LOCATION

☐ Chandler ☐ Glendale ☐ Paradise Valley ☐ Phoenix Central

BREAST EXAMINATION REQUEST

- ☐ Screening Mammogram w/ additional views and/or Ultrasound if necessary for inconclusive Mammogram
☐ Screening Mammogram
☐ Diagnostic Mammogram w/ Ultrasound if necessary
☐ Diagnostic Mammogram
☐ Breast Ultrasound
☐ Breast Ultrasound for Dense Breasts
☐ Breast Biopsy w/ post procedure Mammogram if needed

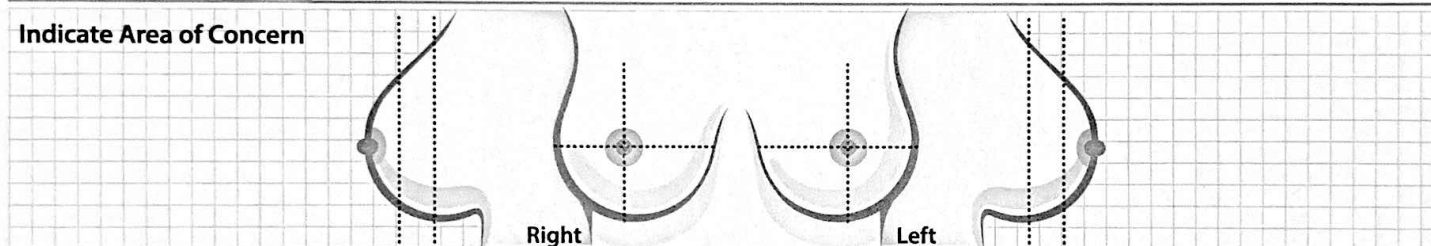
3D (Tomosynthesis) with SmartCurve™ is currently available at all locations.

Select Reason for Procedure

- ☐ Breast Mass ☐ Breast Pain ☐ Breast Cyst
☐ Family History of Breast Cancer ☐ Personal History of Breast Cancer ☐ Abnormal Mammogram
☐ Other _____

FOR CLINICAL USE ONLY

Indicate Area of Concern



BONE DENSITOMETRY REQUEST

- ☐ DEXA Bone Densitometry ☐ DEXA with Vertebral Fracture Assessment

Select Reason for Procedure

- ☐ Screening for Osteoporosis ☐ Post-Menopausal, Natural Status ☐ Post-Menopausal, using HRT
☐ Osteopenia ☐ Osteoporosis ☐ Long-term, current, use of Steroids or High-risk Medications
☐ Other _____

Physician Signature _____ Date _____ Time _____

Facility addresses and services on reverse side.



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PATIENT INSTRUCTIONS

Please arrive 15 minutes before your scheduled appointment time to prepare for your exam.

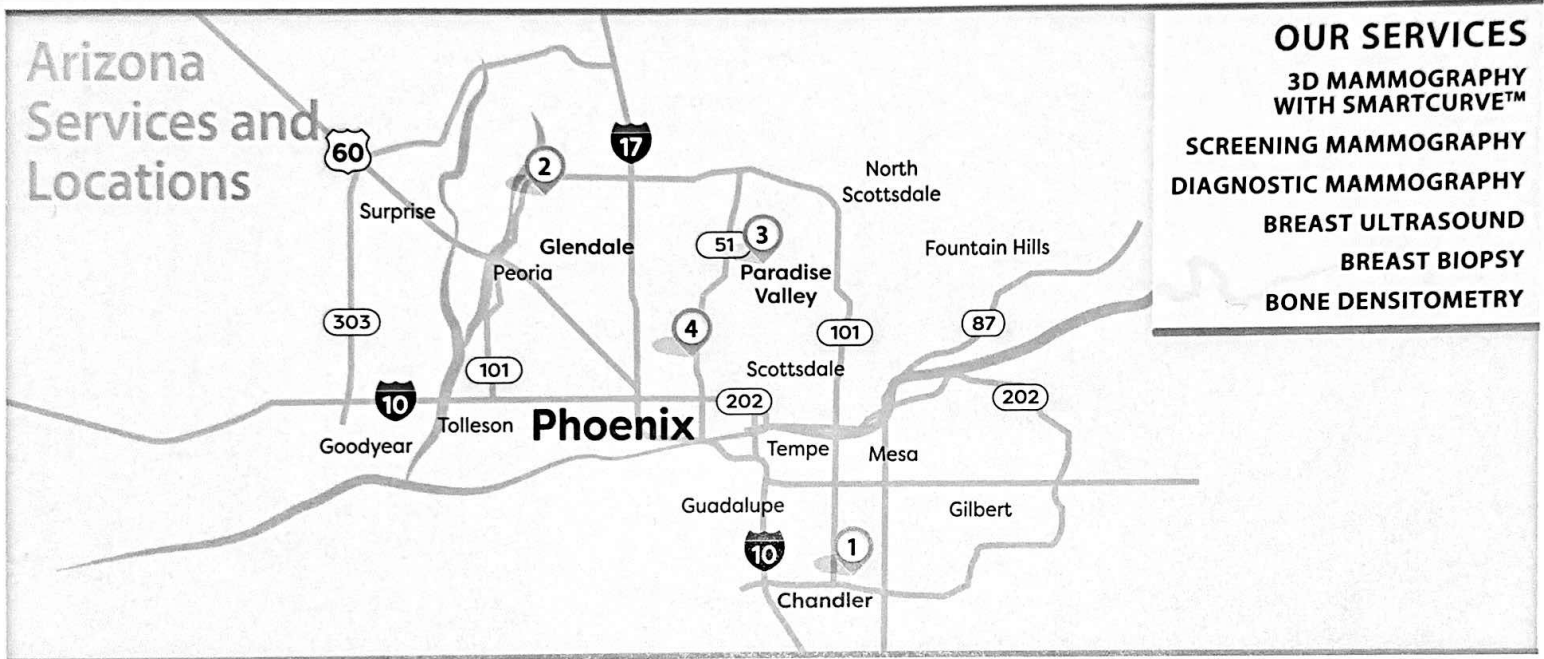
Bring this form, your insurance cards and your driver's license. Please do not bring unattended children to your appointment.

MAMMOGRAM INSTRUCTIONS

Since you will be gowning, we recommend that you wear a blouse with slacks or skirt. Please avoid the use of powder and deodorant the day of your exam. Please do not schedule your appointment one week before or during your menstrual period. To avoid a delay in interpretation, please bring any prior mammograms to your appointment.

BONE DENSITOMETRY INSTRUCTIONS

Please wear loose fitting clothing with no metal zippers or belt buckles below the waist. Please do not take any calcium supplements the day before and the day of your exam. Please note that the weight requirement for this procedure cannot exceed 300 pounds.



OUR SERVICES

3D MAMMOGRAPHY
WITH SMARTCURVE™

SCREENING MAMMOGRAPHY
DIAGNOSTIC MAMMOGRAPHY
BREAST ULTRASOUND
BREAST BIOPSY
BONE DENSITOMETRY

1 **Chandler**
Solis Mammography Chandler
2081 W. Frye Road, Bldg. E, Suite 110 | Chandler, AZ 85224

2 **Glendale**
Solis Mammography Glendale
18699 N. 67th Ave., Suite 110 | Glendale, AZ 85308

3 **Paradise Valley**
Solis Mammography Paradise Valley
11220 N. Tatum Blvd., Suite 105 | Phoenix, AZ 85028

4 **Phoenix (Central)**
Solis Mammography Phoenix (Central)
1661 E. Camelback Road, Suite 140 | Phoenix, AZ 85016